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<b>SERIAL NUMBER</b> 09/506,432	<b>FILING OR 371(c) DATE</b> 02/17/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3627	<b>ATTORNEY DOCKET NO.</b> 032795-001
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/10/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 54	<b>INDEPENDENT CLAIMS</b> 10
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

45722

## TITLE

WORKERS COMPENSATION INFORMATION PROCESSING SYSTEM

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